



DEPARTMENT OF THE NAVY

NAVAL HOSPITAL

BOX 788250

MARINE CORPS AIR GROUND COMBAT CENTER
TWENTYNINE PALMS, CALIFORNIA 92278-8250

IN REPLY REFER TO:

NAVHOSP29PALMSINST 6320.4

Code 0105

22 October 1997

NAVAL HOSPITAL TWENTYNINE PALMS INSTRUCTION 6320.4

From: Commanding Officer

Subj: CUSTOMER RELATIONS PROGRAM

Ref: (a) Accreditation Manual for Hospitals, JCAHO, Current Edition
(b) BUMEDINST 6300.10

Encl: (1) Patient Bill of Rights and Responsibilities
(2) Patient Contact Interview Sheet
(3) Patient Interaction Problem Resolution Process
(4) Patient Contact Representatives by Directorate/Department

1. Purpose. To identify the policy, responsibilities and procedures for the command Customer Relations Program at Naval Hospital, Twentynine Palms, California.

2. Cancellation. NAVHOSP29PALMSINST 6000.6D and NAVHOSP29PALMSINST 6320.60D.

3. Background. A patient's perception of the quality of health care rendered has a profound effect on their healing process. Therefore, it is essential that all staff who interact with patients at this command meet each patient's need with courtesy, understanding, and in a caring manner. This will be done in the spirit of the Patient's Bill of Rights and Responsibilities, enclosure (1), and the provisions of this instruction. The purpose of the Customer Relations Program (CRP) is to facilitate resolution of patient problems/concerns. This process must include documentation of problems, their resolution, and communication with the patient and/or family. It is essential to track and analyze problem trends and to record our efforts to deal with them.

4. Policy. The command has established a CRP, per references (a) and (b), to ensure that all patients, regardless of rank, military status, age, socioeconomic status, or cultural background be provided patient care in a courteous manner, which respects the dignity of the patient and the staff. Patient Contact Representatives (PCR) assigned to specific areas, enclosure (4), can usually resolve most patient complaints/misunderstandings on the spot. To ensure resolution of complaints in a timely manner, patients should always be referred to the PCR for the respective department/area.

5. The objectives of the CPR are to

a. Provide a mechanism for patients to express concerns, problems, and compliments relating to treatment and/or services received.

b. Promote a positive professional relationship between patients and staff.

c. Identify staff personnel to act as the patient's advocate. To observe, anticipate, and rectify problems on behalf of the patients who are socially, culturally, emotionally, or physically unable to speak for themselves.

d. Promote awareness and understanding of patient's rights and responsibilities, per enclosure (1).

e. Provide a means to assist other members of the health-care team in implementing system changes that will benefit patient care at this command.

6. Procedure. All patient complaints will be handled at the lowest level possible. If the patient does not wish to speak with the patient contact representative in the area, then refer the patient to the Command Patient Contact Representative (CPCR). When a patient arrives at the CPCR office the CPCR will document the patient's concern and will forward the documentation to the department representative for appropriate action. If the patient's concerns specifically name an individual/individuals, then the individual(s) identified will have an opportunity to make comments. The Patient Encounter Record of Contact, enclosure (2), provides a simplified format to document the problem.

a. Patient Complaints NOT Related to Staff Attitude or the Adequacy or Standard of Medical Care Provided will be dealt with by a responsible individual closest to the area in which the complaint occurred. Problems not resolved at this level should be forwarded as indicated in enclosure (3).

b. Patient Complaints Related to Staff Attitude or the Adequacy or Standard of Medical Care shall be reviewed by the Department Head, Director, Performance Improvement Coordinator, Executive Officer and the Commanding Officer.

c. Written Responses to Beneficiary Letters and Concerns shall be put in a final smooth format by the CPCR.

d. All Staff Complaints about Patients shall be investigated by the respective department PCR and referred to the Command Master Chief for resolution. When a complaint is justified, a letter from the Commanding Officer will be prepared.

7. Action

a. Directors

(1) Will ensure the CRP is supported within their directorates.

(2) Will provide assistance and facilitate resolution of problems presented by their department PCR.

(3) Will provide support and guidance in customer relations to their departments.

b. Department Heads

(1) Will provide the CPCR with the name of an individual who will act as departmental patient contact representative. Such appointments shall be officers, senior enlisted, or civilian staff members, GS-7 or greater. Junior personnel may be assigned based on their qualifications.

(2) Will review Patient Contact Interview Sheets generated by their PCR and initiate appropriate action.

(3) Will promote the command CRP and their Department PCR's role in the process.

(4) Will provide guidance, define objectives and establish policies and procedures unique to their individual departments, consistent with the command CRP.

c. Patient Contact Representatives. The PCRs are responsible for managing and coordinating the CRP and are identified by department in enclosure (4). The CPCR is assigned as a special assistant to the Executive Officer. The CPCR will:

(1) Accomplish the Customer Relations objectives through the established network of departmental PCRs.

(2) Establish a mechanism for patients and providers to register and resolve complaints in a prompt and professional manner. Enclosure (3) provides this process.

(3) Establish a mechanism to monitor, identify, and report patterns or trends in patient problems/concerns, and use this to generate constructive changes in the Naval Hospital's policy and procedures.

(4) Maintain a current roster of departmental PCRs.

(5) Prepare quarterly reports of patient interactions, identifying problems, requests for assistance, and compliments, to the Commanding Officer.

(6) Document patient interactions, including those requiring follow-up with the Risk Manager.

(7) Prepare an annual review of the CRP.

(8) Conduct quarterly meetings and training for departmental PCRs.

(9) Coordinate the Health Care Consumer Council chaired by the Commanding General, Marine Corps Air Ground Combat Center.

d. Patient Contact Representatives. PCRs function as "action officers" for enactment of the CRP within their department, divisions, clinics or wards. Specific responsibilities include:

(1) Serving as the liaison between the customer and the department staff. PCRs will endeavor to resolve all patient complaints in a timely manner, utilizing the Patient Contact Interview Sheet, enclosure (2).

(2) Maintaining contact with individual(s) making complaints until the complaint is resolved or a referral has been made and someone else has assumed responsibility to resolve the complaint.

(3) Ensuring each Patient Contact Interview Sheet, enclosure (2), is well documented with resolution/action and returned for final review to the CPCR, via the appropriate chain of command.

(4) Maintaining copies of completed patient complaints and compliments involving their areas.

(5) Conducting customer relations training for departmental staff on a quarterly basis.

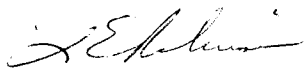
e. Command Duty Officer (CDO)/Officer of the Day (OOD). The CDO and OOD will serve as the Command Patient Contact Representative on weekends, holidays and after normal working hours. CDOs and OODs will ensure that unresolved patient complaints are documented and delivered to the CPCR the following workday.

f. Staff Education and Training Department will:

(1) Ensure all newly assigned personnel become familiar with the Customer Relations Training Program during Command Orientation.

(2) Provide support for other Customer Relations Training evolutions.

g. Performance Improvement/Risk Management (RM) will report potential/actual RM issues to the Risk Manager for tracking as appropriate.


L. E. ROBINSON
Acting

Distribution:
List A



DEPARTMENT OF THE NAVY

NAVAL HOSPITAL

BOX 788250

MARINE CORPS AIR GROUND COMBAT CENTER

TWENTYNINE PALMS, CALIFORNIA 92278-8250

IN REPLY REFER TO:

NAVHOSP29PALMSINST 6320.4 CH-1

Code 0105

23 December 1997

NAVAL HOSPITAL TWENTYNINE PALMS INSTRUCTION 6320.4 CHANGE
TRANSMITTAL 1

From: Commanding Officer

Subj: CUSTOMER RELATIONS PROGRAM

Encl: (1) Enclosure (4), revised

1. Purpose. To transmit the new enclosure to the basic instruction.
2. Action. Remove enclosure (4) of the basic instruction and replace with the corresponding enclosure of this change.
3. Filing. This change transmittal will be filed immediately following the signature page of the basic instruction as page 6.

A handwritten signature in dark ink, appearing to read "R. S. Kayler", is centered on the page.

R. S. KAYLER

Distribution:

List A

PATIENTS' BILL OF RIGHTS AND RESPONSIBILITIES

The recognition of basic rights of human beings for independence of expression and concern for personal dignity can be of great importance as factors in the recovery process. At the same time, the Naval Hospital, Twentynine Palms has the right to expect reasonable and responsible behavior on the part of patients, their relatives and friends. Patients' Bill of Rights and Responsibilities shall be posted in the Outpatient Records area, the entrance to the hospital, the Emergency Department reception area, in each outpatient clinic, the wards, and a copy shall be provided to each patient upon admission.

The Patients' Bill of Rights and Responsibilities are:

RIGHTS

1. Medical Care: The right to quality care and treatment consistent with available resources and standards. The patient has the right also to refuse treatment to the extent permitted by Law and Government regulations, and to be informed of the consequences of his/her refusal. When concerned about the care received, the patient has a right to request a review of the adequacy of care.
2. Respectful Treatment: The right to considerate and respectful care, with recognition of his/her personal dignity.
3. Privacy and Confidentiality: The right, within law and military regulations, to privacy and confidentiality concerning medical care.
4. Identity: The right to know, at all times, the identity, professional status, and professional credentials of health care personnel, as well as the name of the health care provider primarily responsible for his/her care.
5. Explanation of Care: The right to an explanation concerning his/her diagnosis, treatment, procedures, and prognosis of illness in terms the patient can be expected to understand. When it is not medically advisable to give such information to the patient, the information should be provided to appropriate family members or, in their absence, another appropriate person.
6. Informed Consent: The right to be advised in non-clinical terms of information needed to make knowledgeable decisions on consent for treatment. Such information should include significant complications, risks, benefits, and alternative treatments available.

7. Advance Directives: The patient has the right to have an advance directive (such as a living will, health care proxy, or durable power of attorney for health care) concerning treatment with the expectation that the hospital will honor the intent of the directive to the extent permitted by law and hospital policy.

8. Safe Environment: The right to care and treatment in a safe and secure environment.

9. Research Projects: The right to be advised if the facility proposes to engage in or perform research associated with his/her care or treatment. The patient has the right to refuse to participate in any research project.

10. Medical Treatment Facility (MTF) Rules and Regulations: The right to be informed of the facilities' rules and regulations that relate to patient or visitor conduct. The patient should be informed about smoking rules and should expect compliance with Enclosure (1) those rules from other individuals. Patients are entitled to information about the MTF mechanism for the initiation, review, and resolution of patient complaints.

Responsibilities

1. Providing Information: The responsibility to provide, to the best of his/her knowledge, accurate and complete information about complaints, past illness, hospitalizations, medications, and other matters relating to his/her health. A patient has the responsibility to let his/her primary health care provider know whether he/she understands the treatment and what is expected of him/her.

2. Respect and Consideration: The responsibility for being considerate of the rights of other patients and MTF health care personnel and for assisting in the control of noise and the number of visitors. The patient is responsible for being respectful of the property of other persons and the facility.

3. Compliance with Medical Care: The responsibility for complying with the medical and nursing treatment plan, including follow-up care recommended by health care providers. This includes keeping appointments and notifying the MTF when appointments cannot be kept.

4. Medical Records: The medical record, including x-rays, is the property of the Naval Hospital Twentynine Palms and is maintained for the benefit of the patient, the medical staff and the

hospital. The hospital is required to safeguard the information in the record against loss, defacement, tampering or use by unauthorized persons. Patients are not allowed to maintain their medical record, but are allowed to request and obtain copies of their medical record.

5. MTF Rules and Regulations: The responsibility to follow the MTF rules and regulations affecting patient care conduct. Smoking is not authorized anywhere in the hospital and only in designated spaces on the hospital grounds.

6. Reporting of Patient Compliments/Complaints: The responsibility for helping the MTF Commanding Officer provide the best possible care to all beneficiaries. Patient recommendations, questions, or complaints should be reported to the appropriate Customer Relations Representative.

NEONATAL, CHILD, AND ADOLESCENT PATIENT
BILL OF RIGHTS AND RESPONSIBILITIES

The policy of Naval Hospital Twentynine Palms is to provide the best possible treatment to all patients at all times, under all circumstances, and in an equitable and humane manner. In keeping with these principles, you, our patient, and you, our patient's parents/guardians have the following rights:

1. To receive information at the time of admission about your patient rights and how to resolve complaints concerning the quality of care.
2. To know the name and specialty of all physicians participating in your care.
3. To receive complete information from your primary physician concerning the nature and extent of the medical problem, the planned course of treatment, and the expected outcome in language you can understand.
4. To receive from your physician information necessary to give informed consent before a procedure or treatment.
5. To refuse treatment to the extent permitted by law and to be informed of the medical consequences of this action.
6. To regard participation in data gathering for research as voluntary and feel free to refuse to participate.

7. To expect reasonable continuity of care and to be informed of continuing health care requirements following discharge.
8. To safeguard the right to privacy, within the law, with respect to confidentiality of disclosures. Case discussion, consultation, examination, and treatment are confidential and shall be conducted with privacy maintained.
9. To expect that Naval Hospital Twentynine Palms will respond to a request to a request for services in a reasonable manner.
10. To know hospital rules and regulations as they apply to you as patient or parent.
11. To receive considerate care that respects the patient's personal value and belief systems.
12. To make decisions about your health care through discussions with your physician.
13. To participate in the discussion of ethical issues relating to your health care.
14. For patients who have not yet reached the age of majority, these rights apply to the patient's parent or guardian, unless the minor is emancipated.

RESPONSIBILITIES

1. The patient or the patient's parent/guardian will be responsible for providing accurate and complete information about matters relating to his/her health and to report changes in his/her condition.
2. The patient or the patient's parent/guardian will be responsible for following the treatment plan recommended by the practitioner and for reporting to the physician any side effects. If the patient refuses treatment, fails to follow directions of his/her physician or proper hospital personnel, he/she will be responsible for his/her actions.
3. The patient or the patient's parent/guardian will be responsible for assuring that the financial obligations of his/her healthcare are fulfilled.
4. The patient or the patient/s parent/guardian will be responsible for following the hospitals rules and regulations and for being considerate of the rights of others while the hospital, such as assisting in the control of noise, smoking, and the number of visitors.

NAVHOSP29PALMSINST 6320.4
22 October 1997

NAVAL HOSPITAL TWENTYNINE PALMS, CA
PATIENT CONTACT INTERVIEW SHEET

LOG #:

PATIENT'S NAME:

SPONSOR'S NAME:

SPONSOR'S SSN:

RANK/RATE:

SERVICE:

DUTY STATION:

DUTY PHONE:

HOME ADDRESS:

HOME PHONE:

1. STAFF INTERVIEWER:

TIME AND DATE OF INTERVIEW:

2. COMPLAINT OR PROBLEM (In patient's perspective):

INTERVIEWERS NOTE:

3. RECOMMENDED ACTION TO BE TAKEN: Route to the following for comments: (e.g. Area Pt. Contact Rep, Member(s), Dept. Head, Dir.)

Enclosure (2)

NAVHOSP29PALMSINST 6320.4
22 October 1997

PATIENT CONTACT ROUTING SHEET

PG 2 of
LOG #:

PLEASE RETURN TO PATIENT CONTACT REPRESENTATIVE (X2427) WITHIN 2
WORKING DAYS

Reviewed by: Patient Contact Representative, (AREA)

_____/_____/_____
(Name, Printed) (Signature) (Date)

Comments:

Reviewed by: Member

_____/_____/_____
(Name, Printed) (Signature) (Date)

Comments:

PATIENT CONTACT ROUTING SHEET

PG3 of
LOG #:

PLEASE RETURN TO PATIENT CONTACT REPRESENTATIVE (X2427) WITHIN 2
WORKING DAYS

Reviewed by: Department Head

_____/_____
(Name, Printed) (Signature) (Date)

Comments:
Actions or suggestions which could prevent similar circumstances
from occurring in the future:
Patient Contact Representative:

_____/_____
(Name, Printed) (Signature) (Date)

Comments:

NAVHOSP29PALMSINST 6320.4
22 October 1997

PATIENT CONTACT ROUTING SHEET

PG4 of
LOG #:

PLEASE RETURN TO PATIENT CONTACT REPRESENTATIVE (X2427) WITHIN 2
WORKING DAYS

Reviewed by: Director

_____/_____/_____
(Name, Printed) (Signature) (Date)

Comments:

Reviewed by: Performance Improvement/Risk Manager

_____/_____/_____
(Name, Printed) (Signature) (Date)

Comments:

Enclosure (2)

PATIENT CONTACT ROUTING SHEET

PG 5 of
LOG #:

PLEASE RETURN TO PATIENT CONTACT REPRESENTATIVE (X2054) WITHIN 2
WORKING DAYS

Reviewed by: Executive Officer

_____/_____
(Name, Printed) (Signature) (Date)

Comments:

Reviewed by: Commanding Officer

_____/_____
(Name, Printed) (Signature) (Date)

Comments:

**PATIENT INTERACTION
PROBLEM RESOLUTION PROCESS**

SATISFIED

PATIENT WITH CONCERNS
Code 0105

NOT SATISFIED

DEPARTMENTAL PATIENT
REPRESENTATIVE

SATISFIED

SATISFIED

DEPARTMENT
HEAD

SATISFIED

DIRECTORATE

SUBMIT PATIENT
ENCOUNTER RECORD
OF CONTACT TO CRR

CUSTOMER RELATIONS
REPRESENTATIVE

EXECUTIVE OFFICER

QRTLY INTERACTION
REPORT

COMMANDING OFFICER

NAVHOSP29PALMSINST 6320.4 CH-1
23 December 1997

AREA PATIENT CONTACT REPRESENTATIVES

| <u>Directorate</u> | <u>Department</u> |
|--------------------|---|
| Executive Officer | Coordinator |
| Administration | Food Management Patient Administration Health Benefits |
| Ancillary Services | Pharmacy Physical Therapy Preventive Medicine Optometry Radiology Laboratory |
| Medical Service | Mental Health Family Practice Clinic Military Sickcall Pediatric Clinic Emergency Department OB/GYN Clinic |
| Nursing Services | Labor and Delivery Maternal Infant Ward Multi-Service Ward Main OR/PACU |
| Surgical Services | General Surgery Clinic Orthopedic Clinic |

Enclosure (4)